MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/019200

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED IND.	AS FILED DEP.	AFTER 1st AMENDMENT IND.	AFTER 1st AMENDMENT DEP.	AFTER 2nd AMENDMENT IND.	AFTER 2nd AMENDMENT DEP.		°IND.	°DEP.	°IND.	°DEP.	°IND.	°DEP.
1							51						
2							52						
3							53						
4							54						
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42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.		3					TOTAL IND.						
TOTAL DEP.		22					TOTAL DEP.						
TOTAL CLAIMS		25					TOTAL CLAIMS						

PTO-1360 (3-78)